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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known					
<b>FEE TRANSMITTAL</b> <b>For FY 2006</b>		Application Number	10/664,050				
		Filing Date	September 17, 2003				
		First Named Inventor	HUANG et al.				
		Examiner Name	Irene Marx				
		Art Unit	1651				
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	02240-218200				
TOTAL AMOUNT OF PAYMENT (\$)		125.00					
<b>METHOD OF PAYMENT (check all that apply)</b>							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____							
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>22-0261</u> Deposit Account Name: <u>Venable LLP</u>							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee							
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments							
<b>FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
Application Type	FILING FEES	SEARCH FEES	EXAMINATION FEES		Fees Paid (\$)		
	Small Entity	Small Entity	Small Entity	Small Entity			
Utility	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
Design	300	150	500	250	200	100	
Plant	200	100	100	50	130	65	
Reissue	200	100	300	150	160	80	
Provisional	300	150	500	250	600	300	
	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
						Small Entity	
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
- 20 =		x	=		Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 =		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)		
- 100 =		/50	(round up to a whole number) x	=			
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							
Other:							
<input checked="" type="checkbox"/> 1.136 Petition for Extension of Time (1-month)						60.00	
<input checked="" type="checkbox"/> 1.20(d) Terminal Disclaimer Fee						65.00	
<b>SUBMITTED BY</b>							
Signature				Registration No. (Attorney/Agent)	36,830	Telephone	(202) 344-4000
Name (Print/Type)	Ann S. Hobbs, Ph.D.			Date	October 13, 2006		